

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 06, 1999 8:00 am  
Secretary of State

05-06-1999 90118 021 \*\*\*150.00

DOCUMENT # P95000056927

1. Corporation Name

LEHIGH DRYWALL & STUCCO, INC.



Principal Place of Business

4401 LEE BLVD  
LEHIGH ACRES FL 33971  
US

Mailing Address

4401 LEE BLVD  
LEHIGH ACRES FL 33971  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/21/1995

4. FEI Number

65-0594242

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

21 315 Cleveland Ave, N

Suite, Apt. #, etc.

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23 Lehigh Acres, FL

24 33972 25 USA

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2a. Mailing Address

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Suite, Apt. #, etc.

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9. Name and Address of Current Registered Agent

CLOUSE, LORRE  
4401 LEE BLVD  
LEHIGH ACRES FL 33971

10. Name and Address of New Registered Agent

81 Name

Same

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Street Address (P.O. Box Number is Not Acceptable)

315 Cleveland Ave, N

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City Lehigh Acres

FL

85 Zip Code

33972

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME STULB, JOSEPH JR.

STREET ADDRESS 1406 N.E. VAN LOON LANE

CITY-ST-ZIP CAPE CORAL FL 33909

TITLE VP ☐ DELETE

NAME CLOUSE, JOSEPH E

STREET ADDRESS 4401 LEE BLVD.

CITY-ST-ZIP LEHIGH ACRES FL 33971

TITLE S ☐ DELETE

NAME CLOUSE, LORRE J

STREET ADDRESS 4401 LEE BLVD.

CITY-ST-ZIP LEHIGH ACRES FL 33971

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 8514 Charter Club Cr., #4

1.4 CITY-ST-ZIP Ft. Myers, FL 33919

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 315 Cleveland Ave, N

2.4 CITY-ST-ZIP Lehigh Acres, FL 33972

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS 315 Cleveland Ave, N

3.4 CITY-ST-ZIP Lehigh Acres, FL 33972

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LORRE J. CLOUSE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-99

Date

941-369-8033

Daytime Phone #

CR2E034 (11/98)

0492576